LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

Data of Confidence Name

Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd Floor, Baron Rouge LA 70808, (225) 763-8777 or (800) 842-6630. No fee is required.
- This form must be submitted within 5 days of any changes in your registration form, in add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

1. NAME BENOIT HARRY L

FOR OFFICE USE ONLY
Postmark Date: 05/03/04

SUPP

1040681

- 2. BUSINESS PHONE 337 332-1243
- 3. BUSINESS ADDRESS 492 A) ONH 37 BREAUX BRIDGE UA. 705 17
 Street and No. City State Zip

MAILING ADDRESS Street and No. City State Zip

4. EMPLOYER SELF

Street and No. City State

6. Have you ceased or terminated all lobbying activities requiring registration? Yes No

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or climinating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

REGIONA HEALTH CARE GROUPS

Address 8704 SEFFERSON HWY SUITE C

Business or purpose HEAKTH CARE

New Representation

If No. who pays you?

Does this person pay you? 425

\$596075 RDs (WELL SV 129 80612) - 50

Terminated Representation as of _____

HAND DELIVERED

5. EMPLOYER'S ADDRESS

SUPPLEMENTAL REGISTRATION FORM



2.	Name
	Address
	Business or purpose
	New Representation Does this person pay you?
	If No, who pays you?
	Terminated Representation as of
3.	Name
	Address
	Business or purpose
	New Representation Does this person pay you?
	If No, who pays you?
	Terminated Representation as of

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 ct seq.] has been deliberately omitted.

Signature of Lobbyist

Form 501, Rev. 10/2002